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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\*****\*\* FOREIGN APPLICATIONS \*\*\*\*\***

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**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\* 06/19/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance
Verified and Acknowledged	Examiner's Signature      Initials
ADDRESS	STATE OR COUNTRY JAPAN
2292	SHEETS DRAWING 9
TITLE	TOTAL CLAIMS 11
FILING FEE RECEIVED 920	INDEPENDENT CLAIMS 4

FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other <input type="checkbox"/> Credit
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